

State of Rhode Island and Providence Plantations Contract Offer
RIVIP GENERATED BIDDER CERTIFICATION COVER FORM

SECTION 1 - VENDOR INFORMATION

Bid/RFP Number: B03703PT1

Bid/RFP Title: PART 1 - RFP - HEALTH CARE TECHNICAL SERVICES (32 PGS)

Opening Date & Time: 5/26/2004 2:00 PM

RIVIP Vendor ID #: 26665

Vendor Name: Northrop Grumman Mission Systems Northeast

Address: 301 Metro Center Blvd
Suite 104
Warwick, RI 02886
USA

Telephone: (401) 732-9000

Fax: 401 732 9000

E-Mail: jim.dresser@ngne.com

Contact Person: James Dresser

Title: Fin & Bus Manager

R.I. Foreign Corp #:

Federal Tax ID #: 050366090

NOTE: AWARD OF CONTRACTS AND PURCHASE ORDERS SHALL BE SUBJECT, AT THE DISCRETION OF THE PURCHASING AGENT, TO THE OFFEROR COMPLETING AN ON-LINE RIVIP REGISTRATION at www.purchasing.ri.gov. It is THE RESPONSIBILITY OF THE VENDOR to make on-line corrections/updates using the Vendor maintenance program on the RI Division of Purchases Web Site.

SECTION 2 - REQUIREMENTS

ALL OFFERS ARE SUBJECT TO THE REQUIREMENTS, PROVISIONS AND PROCEDURES CONTAINED IN THIS THREE-PAGE CERTIFICATION FORM. Offerors are expected to READ, SIGN and COMPLY with all requirements. Failure to do so may be grounds for disqualification of the offer contained herein.

Section 2.1 - RULES FOR SUBMITTING OFFERS

2.1A. This THREE-PAGE CERTIFICATION FORM MUST BE ATTACHED IN ITS ENTIRETY TO THE FRONT OF THE OFFER and shall be considered an integral part of each offer made by a vendor to enter into a contract with the State of Rhode Island, Division of Purchases. As such, submittal of the entire Bidder Certification Cover Form, signed by a duly authorized representative of the offeror attesting that he/she (1) has read and agrees to comply with the requirements set forth herein and (2) to the accuracy of the information provided and the offer extended, is a mandatory part of any contract award.

To assure that offers are considered on time, each offer must be submitted with the specific Bid/RFP/LOI number (provided above), date and time of opening marked in the upper left hand corner of envelope. Each bid/offer must be submitted in separate sealed envelopes.

A complete, signed (in ink) offer package, must be delivered to the division of purchases (via any mail or messenger service) by the time and date specified for the opening of responses in a sealed envelope. IF ATTACHMENTS ARE REQUIRED, BE SURE THEY ARE INCLUDED IN PACKAGE!!!! (e.g., Cover, Sureties, Copies of Special Licenses, Samples, Specifications for Offers Differing From Solicitation). Offers received without the entire completed three-page form attached may result in offer disqualification.

Bids must be submitted on the RI bid solicitation forms provided, indicating brand and part numbers of items offered, as appropriate. Bidders must submit detailed cuts and specs on items offered as equivalent to brands requested WITH THE OFFER. Bidders must be able to submit samples if requested.

Mail to P.O. Box #6528, Providence, RI 02940-6528
Courier Division of Purchases, One Capitol Hill, Second Floor, Providence, RI 02908-5855

Documents misdirected to other State locations or which are not present in the Division of Purchases at the time of opening for whatever cause will be deemed to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clocks in either the mail sorting or reception areas of the Division of Purchases. Postmarks shall not be considered proof of timely submission.

2.1B. RIVIP SOLICITATIONS. To assure maximum access opportunities for users, public bid/RFP solicitations shall be posted on the RIVIP for a minimum of seven days and no amendments shall be made within the last five days before the date an offer is due. When copies of plans and specifications are too large to make available on-line and are issued with a requirement for a refundable deposit, vendors on the known lists of depositors will receive direct notification of amendments. Except when access to the Web Site has been severely curtailed and it is determined by the Rhode Island State Purchasing Agent that special circumstances preclude extending a solicitation due date, requests to mail or fax hard copies of solicitations will not be honored. When the result of an Internet solicitation is unsuccessful, the State of Rhode Island will cancel the original solicitation and resolicit the original offer directly from vendors.

2.2. PRICING. Offers are irrevocable for sixty (60) days from the opening date (or such other extended period set forth in the solicitation), and may not be withdrawn, except with the express permission of the State Purchasing Agent. All pricing will be considered to be firm and fixed unless otherwise indicated. The State of Rhode Island is exempt from Federal excise taxes and State Sales and Use Taxes. Such taxes shall not be included in the bid price. PRICES QUOTED ARE FOB DESTINATION.

2.3. DELIVERY and PRODUCT QUALITY. All offers must define delivery dates for all items; if no delivery date is specified, it is assumed that immediate delivery from stock will be made. The contractor will be responsible for delivery of materials in first class condition. Rejected materials will be at vendor's expense.

2.4. PREVAILING WAGE AND OSHA SAFETY TRAINING REQUIREMENTS. Provisions of State labor laws concerning payment of prevailing wage rates and mandatory 10 hour OSHA Safety Training (RIGL 28-20) shall apply for contracts involving public works construction, alteration, or building repair work. Prevailing wage rates are posted in the information section of the RIVIP. Contact the Rhode Island Department of Labor for training program information.

2.5. PUBLIC RECORDS. Offerors are advised that all materials submitted to the State for consideration in response to this solicitation will be considered without exception to be Public Records pursuant to Title 38 Chapter 2 of the Rhode Island General Laws, and will be released for inspection immediately upon request once an award has been made. Offerors are encouraged to attend public bid/RFP openings to obtain information; however, bid/RFP response summaries may be reviewed after award(s) have been made by using the RIVIP at any time or appearing in person at the Division of Purchases Mondays through Fridays between 8:30 a.m. and 3:30 p.m. Telephone requests for results will not be honored. Written requests for results will only be honored if the information is not available on the RIVIP.

SECTION 3. AWARD DETERMINATION.

Award will be made to the responsive and responsible offeror quoting the lowest net price in accordance with specifications, for any individual item(s), for major groupings of items, or for all items listed, at the State's sole option.

3.1. BID SURETY. Where bid surety is required, bidder must furnish a bid bond or certified check for 5% of the bid total with the bid, or for such other amount as may be specified. Bids submitted without a required bid surety will not be considered.

3.2. SPECIFICATIONS. Unless specified "no substitute," product offerings equivalent in quality and performance will be considered (at the sole option of the State) on the condition that the offer is accompanied by detailed product specifications. Offers which fail to include alternate specifications may be deemed nonresponsive.

SECTION 4 – CONTRACT PROVISIONS.

4.1. VENDOR AUTHORIZATION TO PROCEED. 4.1A. When a purchase order, change order, contract/agreement or contract/agreement amendment is issued by the RI Division of Purchases, no claim for payment for services rendered or goods delivered contrary to or in excess of the contract terms and scope shall be considered valid unless the vendor has obtained a written change order or contract amendment issued by the Division of Purchases PRIOR TO delivery.

4.1B. Any offer, whether in response to a solicitation for proposals or bids, or made without a solicitation, which is accepted in the form of an order OR Pricing Agreement made in writing by the Purchasing Agent, or a state official with purchasing authority delegated by the Purchasing Agent, shall be considered a binding contract.

4.2. REGULATIONS, GENERAL TERMS AND CONDITIONS GOVERNING STATE CONTRACTS. This solicitation and any contract or purchase order arising from it are issued in accordance with the specific requirements described herein, and the State's Purchasing Laws and Regulations and other applicable State Laws. The Regulations, General Terms and Conditions are incorporated into all state contracts. These regulations and basic information on How To Do Business with the State of Rhode Island are posted on the Rhode Island Vendor Information Program Website (www.purchasing.ri.gov).

4.3. EQUAL EMPLOYMENT OPPORTUNITY. Compliance certificate and agreement procedures will apply to all awards for supplies or services valued at \$10,000 and more. Minority Business Enterprise policies and procedures, including subcontracting opportunities as described in Title 37 Chapter 14.1, of the Rhode Island General Laws, also apply.

4.4. PERFORMANCE BONDS. Where indicated, successful bidder must furnish a 100% performance bond and labor and payment bond for contracts subject to Title 37 Chapters 12 and 13 of the Rhode Island General Laws. All bonds must be furnished by a surety company authorized to conduct business in the State of Rhode Island. Performance bonds must be submitted within 21 calendar days of the issuance of a tentative notice of award.

4.5. DEFAULT. After an award has been made, failure to meet all requirements of the solicitation for an offer may result in a determination of default.

SECTION 5 – CERTIFICATIONS AND DISCLOSURES
ALL CONTRACT AWARDS ARE SUBJECT TO THE FOLLOWING DISCLOSURES & CERTIFICATIONS
Offerors must respond to every disclosure statement.

A person authorized to enter into contracts must sign the offer and attest to the accuracy of all statements.

Indicate Yes(Y) or No (N):

- _____ 1.Has your firm (or any principal) been subject to any of the following findings by the Federal Government, the State of Rhode Island or any other jurisdiction? Suspension, Debarment, Indictment, Criminal Conviction. CIRCLE APPROPRIATE ITEM(S).
- _____ 2.Has your firm (or any principal) been fined more than \$5000 for a single violation by the Rhode Island Department of Environmental Management for violation of Rhode Island Wetlands law?
- _____ 3.I/we certify that I/we will immediately disclose, in writing, to the Chief Purchasing Officer any potential conflict of interest which may occur during the course of the engagement authorized pursuant to this contract.
- _____ 4.I/we acknowledge that, in accordance with Chapter 37-2-54(3) of the Rhode Island General Laws "no purchase or contract shall be binding on the state or any agency thereof unless approved by the Department [of Administration] or made under general regulations which the Chief Purchasing Officer may prescribe," including change orders and other types of contracts and under State Purchasing Regulation 8.2.1.1.2, "any alleged oral agreement or arrangements made by a bidder or contractor with any agency or an employee of the Office of Purchases may be disregarded and shall not be binding on the state."
- _____ 5.I/we certify that the above vendor information is correct and complete.
- _____ 6.I/we certify that I or my firm possesses all licenses required by Federal and State law and regulation as they pertain to the requirements of the solicitation and offer made herein and shall maintain such required license(s) during the entire course of the contract resulting from the offer contained herein and, should my/our license lapse or be suspended, I/we shall immediately inform the Rhode Island State Purchasing Agent in writing of such circumstance.
- _____ 7.I/we certify that I/we will maintain required insurance during the entire course of the contract resulting from the offer contained herein and, should my/our insurance lapse or be suspended, I/we shall immediately inform the Rhode Island State Purchasing Agent in writing of such circumstance.
- _____ 8.I/we certify that I/we understand that falsification of any information herein or failure to notify the Rhode Island State Purchasing Agent as certified herein may be grounds for suspension, debarment and/or prosecution for fraud.
- _____ 9.I/we acknowledge that the provisions and procedures set forth in this three-page form apply to any contract arising from this offer.
- _____ 10.I/we acknowledge that I/we understand the State's Purchasing Laws (37-2 of the General Laws of Rhode Island) and Purchasing Regulations and General Terms and Conditions available at the Rhode Island Division of Purchases Website (www.purchasing.ri.gov) apply as the governing conditions for any contract or purchase order I may receive from the State of Rhode Island, including the offer contained herein.

IF YOU HAVE ANSWERED "YES" TO QUESTIONS #1 – 2 OR IF YOU ARE UNABLE TO CERTIFY YES TO ITEMS #3 – 10 OF THE FOREGOING, PROVIDE DETAILS/EXPLANATION BELOW AND/OR IN AN ATTACHED STATEMENT. INCOMPLETE CERTIFICATION FORMS SHALL BE GROUNDS FOR DISQUALIFICATION OF OFFER.

Signature below commits vendor to the attached offer and certifies (1) that the offer has taken into account all solicitation amendments, (2) that the above statements and information are accurate, and that vendor understands and has complied with the requirements set forth herein. WHEN DELIVERING OFFERS IN PERSON TO ONE CAPITOL HILL, VENDORS ARE ADVISED TO ALLOW AT LEAST ONE HOUR ADDITIONAL TIME FOR CLEARANCE THROUGH SECURITY CHECKPOINTS.

Vendor's Signature:(Person authorized to enter into contracts; signature must be in ink.)

Date_____

Print Name and Title of company official signing offer



Solicitation Information
16 April 04

RFP # B03703

TITLE: Health Care Technical Services

Submission Deadline: 26 May 04 @ 2:00 PM

PRE-BID/ PROPOSAL CONFERENCE: NO

Questions concerning this solicitation may be e-mailed to the Division of Purchases at questions@purchasing.state.ri.us no later than **3 May 04 at 12:00 Noon (EDT)**. Questions should be submitted in a *Microsoft Word attachment*. Please reference the RFP / LOI # on all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information.

SURETY REQUIRED: No BOND REQUIRED: No
--

Jerome D. Moynihan, C.P.M., CPPO
Administrator of Purchasing Systems

Vendors must register on-line at the State Purchasing Website at www.purchasing.ri.gov.

NOTE TO VENDORS:

Offers received without the entire completed three-page RIVP Generated Bidder Certification Form attached may result in disqualification.

THIS PAGE IS NOT A BIDDER CERTIFICATION FORM

TABLE OF CONTENTS

SECTIONS	Page
I. Introduction.....	1
II. Background and Purpose	3
III. Scope of Work	5
IV. Minimum Contractor Requirements	18
V. Proposal Submission.....	20
VI. Evaluation and Award	25
VII. Governing Terms and Conditions.....	28
VIII. Glossary	40
Appendix 1 – Level of Effort.....	42
ATTACHMENTS	
A. STAFFING SUMMARY	
B. STAFFING EXCEPTIONS	
C. LABOR COSTS	
D. COST PROPOSAL SUMMARY	

SECTION I. INTRODUCTION

The Rhode Island Department of Administration/Office of Purchases, on behalf of the Rhode Island Department of Human Services is soliciting proposals from qualified firms to procure the services of a qualified health care management firm, as described elsewhere herein, and in accordance with the terms and of Request and the State's General Conditions of Purchase available at www.purchasing.ri.gov

This is a Request for Proposals, not an Invitation for Bid; responses will be evaluated on the basis of the relative merits of the proposals, in addition to price. There will be no public opening and reading of responses received by the Office of Purchases pursuant to this Request, other than to name those offerors who have submitted proposals.

INSTRUCTIONS AND NOTIFICATIONS TO OFFERORS:

- Potential offerors are advised to review all sections of this Request carefully, and to follow instructions completely, as failure to make a complete submission as described elsewhere herein may result in rejection of the proposal.
- Alternative approaches and/or methodologies to accomplish the desired or intended results of this procurement are solicited. However, proposals which depart from or materially alter the terms, requirements, or scope of work defined by this Request will be rejected as being non-responsive.
- All costs associated with developing or submitting a proposal in response to this Request, or to provide oral or written clarification of its content, shall be borne by the offeror. The State assumes no responsibility for these costs.
- Proposals are considered to be irrevocable for a period of not less than sixty (60) days following the opening date, and may not be withdrawn, except with the express written permission of the State Purchasing Agent.
- All pricing submitted will be considered to be firm and fixed unless otherwise indicated herein.
- Proposals misdirected to other state locations of which are otherwise not present in the Office of Purchases at the time of opening for any cause will be determined to be late and will not be considered. For the purposes of this requirement, the official time and date shall be that of the time clock in the reception area of the Office of Purchases.
- It is intended that an award pursuant to this Request will be made to a prime contractor, who will assume responsibility for all aspects of work. Joint venture and cooperative proposals will not be considered, but subcontracts are permitted, provided that their use is

clearly indicated in the offeror's proposal, and the subcontractor(s) proposed to be used are identified in the proposal.

- Offerors are advised that all materials submitted to the State for consideration in response to this Request for Proposals will be considered to be Public Records as defined in Title 38 Chapter 2 of the Rhode Island General Laws, without exception, and will be released for inspection immediately upon request once an award has been made.
- In accordance with Title 7, Chapter 1.1 of the General Laws of Rhode Island, no foreign corporation, a corporation without a Rhode Island business address, shall have the right to transact business in the state until it shall have procured a Certificate of Authority to do so from the Rhode Island Secretary of State (401 222-3040). *This is a requirement only of the successful vendor.*

Interested parties are instructed to peruse the Division of Purchases web site on a regular basis, as additional information relating to this solicitation may be released in the form of an addendum to this RFP / LOI

The offeror should be aware of the State's MBE requirements, which addresses the State's goal of ten per cent (10%) participation by MBE's in all State procurements. For further information, contact the MBE Administrator, at (401) 222-6253 or visit the website <http://www.rimbe.org>

SECTION II. BACKGROUND AND PURPOSE

RHODE ISLAND DEPARTMENT OF HUMAN SERVICES (DHS)

The Department of Human Services is the State agency in Rhode Island responsible for support services for individuals and families in Rhode Island. DHS is divided into two major divisions: the Division of Health Care Quality, Financing, and Purchasing (HCQFP) and the Division of Individual and Family Support (DIFS).

DIVISION OF INDIVIDUAL AND FAMILY SUPPORT

The DIFS is responsible for the following programs: Temporary Assistance for Needy Families, the Food Stamp Program, the Child Care Program, the Family Independence Program and the Adolescent Self-Sufficiency Collaborative (ASSC).

DIVISION OF HEALTH CARE QUALITY, FINANCING AND PURCHASING

Rhode Island's Medicaid Program (Title XIX), and its State Child Health Insurance Program (Title XXI) are operated by the Rhode Island Department of Human Services (DHS) Division of Health Care Quality, Financing and Purchasing. The Division provides health coverage to approximately 170,000 individuals.

The purpose of the Division of Health Care Quality, Financing and Purchasing (HCQFP) is to assure the availability of high quality health care services to consumers; to assure the efficiency and economy of services delivered to program recipients by monitoring providers of services; to coordinate service-delivery efforts with other State Departments and Agencies; and to administer programs in a manner consistent with federal and state laws and regulations. Health services are provided to three population groups: families and children, individuals with disabilities, and the elderly.

DHS is the Single State Agency authorized by the Centers for Medicare and Medicaid Services (CMS) to administer the Medicaid program in Rhode Island.

The Division is structured into three Centers:

- The Center for Child and Family Health is responsible for program and policy development for all eligible families and children. The Center administers the RItE Care Program, which provides health insurance to families who are eligible for benefits as a result of their eligibility for FIP/TANF, or who are income eligible children or pregnant women who have no health insurance. The Center administers the RItE Share premium subsidy program. The Center also administers programs for children with special health care needs who are eligible under Supplemental Security Income (SSI), the Katie Beckett

Program, children enrolled in adoption subsidy arrangements, and children in temporary foster care. This Center is also the responsible for Research and Evaluation for the entire Division of HCQFP.

- The Center for Adult Health has responsibility for programs providing acute and long-term care services to Adults with Disabilities and the elderly, both directly and through interagency agreements with other state Departments. The Center administers four Home and Community-Based Services Waiver programs which offer an alternative to institutional care, and has submitted a Waiver request to the Centers for Medicaid and Medicare Services (CMS) that will expand the long term care continuum by including Assisted Living as an additional alternative to placement in a nursing home. The Center is also responsible for operation of the State's Medicaid Management Information System (MMIS), oversight of the State's Fiscal Agent, and the Hospital Admission Screening and Utilization Review program.
- The Center for Finance and Administration contains core administrative functions of the Division: budgeting, expenditure tracking analysis, hospital rate setting and payment, and recoveries from third parties for claims liability (TPL).

CMS imposes certain "Terms and Conditions" for Rhode Island's 1115 waiver, under which RItE Care operates. One of the terms and conditions CMS requires is that Rhode Island use the services of an experienced health care management consulting firm to operate the program under the State's direction.

SECTION III. SCOPE OF WORK

PROCUREMENT OBJECTIVE

The objective of this Request for Proposal (RFP) is to competitively procure the services of a qualified health care management consulting firm that has extensive experience in health policy analysis and in the planning, design, development, and support of integrated health care delivery systems that serve Medicaid eligible individuals. The firm must demonstrate significant expertise in understanding the needs of Medicaid eligible populations and the planning, design, development, implementation and management of effective health programs to serve those populations. The consulting firm needs to demonstrate expertise in the purchasing of accountable health care delivery systems for Medicaid and populations with special needs.

Scope of Engagement

- The “Base” engagement shall provide health care management consulting services for the Rhode Island Department of Human Services. Most of the services under this contract will be performed for the Center for Child and Family Health. Some tasks may/will provide support to the Division of HCQFP, the Center for Adult Health, Center for Finance and Administration, as well as for DHS’s Office of Child Care. The contract will be overseen and administered by the Administrator, Center for Child and Family Health.
- Some of the current functions of The Department of Human Services will soon be consolidated, along with similar functions of four other Human Services Departments into a newly formed overarching office of Health and Human Services. This may result in some or all of the functions under this contract moving to this new office. It may also result in other restructuring within the division of Health Care Quality Finance and Purchasing, or the Department of Human Services. It is the intent of the state to continue to require the support functions under this contract even if some or all functions are moved to other centers, divisions, departments or offices within state government.
- The state reserves the right, at any time during the term of the resultant award pursuant to this solicitation, to expand the “Base Engagement” to include additional like services.

In the interest of simplicity, all general references to the Contracting entity in this solicitation refer to the Center for Child and Family Health, but their meaning may be expanded to encompass the Center for Adult Health, and the Division of Health Care Quality, Financing and Purchasing, or the Office of Child Care as may be most appropriate.

This Request for Proposals includes a description of the scope of work to be performed by the contractor. The Contractor is required to recruit and retain qualified staff to perform all activities in Task 1-4 of the base engagement and for Task 5 at the state's request as described in the RFP.

Under the general direction and approval of the Administrator, Center for Child and Family Health, the Contractor will be required to undertake health policy-related activities, health care purchasing related activities and supports and other related activities. The specific tasks and activities the Contractor will perform under the Base Engagement section of the contract are organized into five tasks:

Base Engagement:

- Task 1: Health Care Purchasing Support (including Program Design, Development Implementation and Management)
- Task 2: Health Care Purchasing Business Function Support
- Task 3: Health Policy Support Activities (including Analysis, Planning, Reporting and Communication)
- Task 4: Oversight and Monitoring of Comprehensive Child Care Providers
- Task 5: Oversight and Management of Medicaid Special Education Program
- Task 6: Special Projects / Enhancement Activities

Tasks 1, 2, and 3 will be bid as one fixed priced; Tasks 4 and 5 will be bid as one separate fixed price and Task 6 will be bid and paid on a time and materials basis.

The specific tasks are described in greater detail in the next section of this document. Although the State intends to define the Contractor's role in the manner described below, it may alter the scope of contractor responsibilities following review of the proposals.

TASK 1 HEALTH CARE PURCHASING SUPPORT

Task 1 is divided into the following activities:

- Activity 1: Health Care Purchasing Design, Development and Implementation
- Activity 2: Contracts and Agreements
- Activity 3: Contract Oversight and Monitoring
- Activity 4: Quality Improvement Plan
- Activity 5: Medical Consultation
- Activity 6: Rite Share Program Support

1-1: Health Care Purchasing Design, Development And Implementation

Since 1994, with the implementation of RIte Care and enrollment of Medicaid families into Health Plans, Rhode Island's Medicaid program has been moving from a payor to a purchaser. DHS will continue to move its Medicaid populations and services from fee for service (FFS) payment systems to accountable integrated systems of care. As a purchaser, DHS will move the responsibility for delivery of covered benefits for Medicaid enrollees from a FFS payment system to performance based contracts which integrate finance and service delivery to assure quality and access at the lowest price. DHS will measure improvements in health access, health status and health outcomes for purchased health care services. DHS will move its Medicaid populations into accountable delivery systems which focus on primary and preventive care, and provide community based service options and supports to reduce the need for and reliance on high cost institutional-based services.

The Contractor will support DHS as it designs, develops and implements integrated accountable delivery systems for Medicaid enrollees. This includes supporting DHS as it moves new populations and services into integrated delivery systems/managed care.

The Contractor will support the process and activities necessary to implement new accountable systems of care and/or enroll new populations into current integrated delivery systems, including:

- Stakeholder development and input
- Utilization and cost analyses
- Delivery system specifications
- Contract development and oversight
- Performance goals
- Waivers/state plan amendments
- Rate setting
- Provider qualification
- Member education and enrollment
- Monitoring, reporting and evaluation

1-2: Contracts and Agreements

The Contractor will draft bids, Certification Standards, Agreements and performance based contracts for contracted health care services and related activities of the CCFH. This activity will also include assistance with contract negotiations, reviewing bidders' proposals, and supporting the purchasing/contracting process. Specific activities are expected to include support in rate setting, procurement, reprocurement, amendments and clarifications; more specifically:

- Rate Setting may include establishing various policies and rates such as capitation rates, risk sharing, risk adjustment, stop loss, etc. It also includes Federally Qualified Health Center (FQHC) rate setting, including establishing payment

methodology and rates to ensure FQHCs are paid in accordance with federal rules under the PPS provision.

- Assist in reprocurement of health plan contracts at next new bid. Next new health plan contract will begin January 1, 2005.
- Provision of Actuarial Services: Rate setting with Health Plans requires a qualified actuary to certify all rates and changes to rates. Contractor will provide actuarial services from a qualified actuary to develop and certify rates as required by CMS. Actuary will have experience with rate setting for Medicaid populations and disabled populations.
- Contractor will maintain an organized file of health plan contract documents and correspondence including tracking all contract documents as they are negotiated, finalized and signed.

Examples of contracts the contractor will support under this activity are:

- Health Plan contracts
- Rhode Island Public Transit Authority (RIPTA) Contract
- Health Services Contracts, such as contracts for:
 - Neonatal Intensive Care Unit (NICU) services
 - Home Based Therapy Services
 - Lead Center Services and
 - CEDARR Family Centers
 - CEDARR Direct Services
- And certain Administrative Contracts such as:
 - EQRO Contract
 - Contract with Health Center Association to manage and provide Family Resource Counselor services.

As a component of this Task, the Contractor will provide DHS with specialized support in the development, implementation, and monitoring of programs that serve Medicaid enrollees with special health care needs and their families. The scope of activities includes support for the development of purchasing standards for Medicaid covered services. The Contractor will support and maintain data systems to manage information about CEDARR Direct Services care plans and the collection and analyses of information from CEDARR sites.

1-3: Contract Oversight and Monitoring

This activity is to monitor the quality, financial and operational performance of contractors providing services under activity 1-2. In particular, the contractor will be responsible for monitoring and oversight of health plans participating in the RIte Care program. This includes

monitoring risk-sharing components of the contract, including oversight of health plan actions to ensure prudent management of services where the State is sharing risk with the plan. Monitoring and oversight requires the use of technically qualified and experienced personnel, the preparation of monitoring tools, reports, and recommendations for performance improvement and corrective action plans.

The components of oversight and monitoring include: annual comprehensive site visits which incorporate evaluation of performance measures; member satisfaction survey to be administered at least every two years and to be statistically significant to the Health Plan level; collection, organization reporting and analysis of utilization and expenditure data; provider network analysis; and review for compliance with applicable Federal and State regulations and contract requirements including NCQA quality standards and NAIC financial standards.

- Areas of contract oversight and monitoring may include:
 - Provider Contracting
 - Financial solvency
 - Management information system (MIS) and utilization data submission
 - Claims payments
 - Member services
 - Quality Improvement Plan (QIP)
 - Utilization Review (UR) and Medical Care Coordination
 - Grievance and complaints
 - Performance measures
 - Benefits
 - Provider network
 - Provider and patient education and related materials
 - Plan Member satisfaction survey

The contractor will provide staff to this project who will have necessary experience and expertise to constitute a contract oversight and monitoring team, including clinical, financial, and managed case operations expertise.

1-4 Quality Improvement Plan

The Contractor will design, implement and monitor a comprehensive managed care quality improvement plan which meets CMS requirements.

The Contractor will also provide CCFH with expertise to oversee the design, development and implementation of studies performed by the EQRO under contract with the state.

1-5 Medical Consultation

Consulting physician(s)/clinician(s) will provide services to both CCFH and CAH. Such consultation should provide experience and clinical expertise in pediatric/family as well as adult/geriatric areas with a focus on primary care and chronic disease management.

- Serve as liaison with Rhode Island's medical community
- Develop and implement appropriate clinical policies to assure quality of care for Medical Assistance covered populations.
- Assist in the development of best practices to improve health status and utilization of RItE Care members.
- Participate in the development of program strategies for delivery of services to children with complex medical and/or behavioral health service needs, adults with disabilities, and the elderly.
- Evaluate clinical requirements for including new populations in coordinated, integrated delivery systems.
- Develop clinical models that provide options other than institutional care for Medicaid eligibles.
- Conduct clinical assessment of proposed care plans for children with autism spectrum disorders.
- Provide clinical support/expertise as needed.

1-6 RItE Share Program Support

The Department of Human Services operates the RItE Share Premium Assistance program to assure access to employer sponsored coverage when available to eligible members. Under this arrangement, DHS assists Medicaid eligible families and individuals to purchase employer sponsored health coverage by paying the employee share of such coverage. The Contractor will provide management support to RItE Share by providing ongoing RItE Share program management.

RItE Share Program management includes operation and staffing the Employer Contact Unit (ECU). The activities include the development and maintenance of necessary electronic files that identify participating employers, health plans and individuals for purposes of premium subsidy payments. The unit is responsible for receiving, reviewing and returning files for individuals, families and employers to determine their eligibility to participate in the premium subsidy program and then ensuring prompt enrollment and timely, accurate payment. This requires the systematic collection of information about health plans, coverage and costs. The staff of the Employer Contact Unit will communicate with employers and other interested constituencies to present information about premium subsidy and will facilitate prompt RItE Share member enrollment and accurate payment.

TASK 2: HEALTH CARE PURCHASING BUSINESS FUNCTION SUPPORT

Task 2 is divided into the following Activities:

- Activity 1: Coordinated Information and Reporting
- Activity 2: Enrollment and Expenditure Management
- Activity 3: Health Services Utilization Reporting
- Activity 4: RIte Care Member Enrollment Support
- Activity 5: Center for Child and Family Health Member Services Support
- Activity 6: CCFH Administrative Support

2-1. Coordinated Information and Reporting

Under the terms of this agreement, the Contractor will provide DHS with the necessary analytical support to meet the requirements of CMS to assure compliance with federal regulations under Medicaid and SCHIP. Such analyses and reporting includes timely reports to CMS on all aspects of CCFH programs and analyses to measure program performance, enrollment and expenditures.

CCFH requires reliable and consistent information systems support to assess program performance in the areas of enrollment, utilization and expenditures. CCFH also needs information to support the analysis of opportunities to develop new program initiatives.

Contractor will provide a coordinated management report function to support ongoing programs/contract management and for policy, program and business decisions. A coordinated standard set of program management reports will be provided monthly and/or quarterly and annually as appropriate to CCFH program staff. The contractor will provide information and reports to support all CCFH activities, such as federal reporting, requests from state and national health policy organizations, federal requests, etc.

The Contractor will provide the information and reporting capacity to support Health Care Purchasing Activities including ongoing program management, new program development and rate setting, as well as reports and analyses to estimate future program enrollment, utilization and expenditures. Information and data will be provided for special analyses in the areas of health policy and planning. The Contractor will assist CCFH in the preparation and dissemination of reports and analysis of data to respond to efforts to improve service delivery. The Contractor will provide DHS with documentation describing reports that are routinely generated from existing systems.

Program Management requires the ability to link data that resides in multiple and different automated systems such as eligibility (InRhodes), the fiscal intermediary (MMIS), and CCFH program databases such as HBTS, CEDARR, Katie Beckett, etc. The Contractor will provide assistance to access such independent data systems and will create timely and appropriate report profiles that describe eligible populations, service utilization and cost analyses. The Contractor will serve as CCFH's technical liaison with other data systems and users.

The Contractor will support the maintenance and modification of the ECU database. The database was developed to allow DHS to maintain RItE Share current information about participating employers and employees participating in the premium subsidy program.

2-2. Enrollment and Expenditure Management

CCFH has transitioned Medicaid from a payor to a purchaser of health services. This transition has an impact on service providers, budgetary processes (State and Federal), reports to Federal and State oversight agencies and monitoring of the financial performance of Health Plans and other accountable entities under contracts to provide integrated health services. In its work with the state, the Contractor will assist CCFH and the Division to achieve a strategy that maximizes Federal support for all program activities, provides budget and enrollment predictability and uses public dollars most efficiently. The Contractor will provide CCFH and the Division support in the analysis, organization and presentation of financial, enrollment and utilization data and information to meet State and Federal requirements and support decision-making. The Contractor will work with the state to refine enrollment, utilization, budget and financial reports.

Specific responsibilities will include providing:

- Financial, enrollment, and utilization expertise for oversight of Health Plans and direct provider contracts.
- Assist the CCFH in budget preparation, ongoing projection and monitoring of enrollment and expenditures including managed care, fee-for-service, and premium subsidy.
- Produce CCFH data for CMS enrollment and financial and budget neutrality reports for Medicaid and SCHIP claiming, including enhanced FMAP claiming.

Center for Medicare and Medicaid Services (CMS) requires that the Department maintain current information to document that the RItE Share premium assistance program is cost effective. To meet this federal requirement, the Contractor will perform continuous monitoring of the Rhode Island environment on the cost of RItE Share qualified health insurance plans. The Contractor will update as needed the necessary information to support the determination of cost effectiveness consistent with the agreement established with CMS.

The Contractor will provide the state with documentation of all standard financial and enrollment reports, so that they could be replicated independently.

2-3. Health Services Utilization Reporting

The Contractor will use a combination of the fee-for-service and encounter databases to develop and maintain information, analyses and reports on the use of health services by CCFH populations, such as RItE Care, RItE Share, Populations with Special Health Care Needs, and enrollees with other health insurance coverage. The Contractor will provide the state with the documentation of such reports (so they could be replicated independently).

The Contractor will also provide information, reports and analyses of service use of particular areas of interest to the state. This may include, for example, areas such as hospitalization, emergency room visits, drugs, and oral health services, as well as utilization of services for particular populations and for measurement of health plan performance.

The Contractor will support the State in the collection, refinement, organization and analysis of utilization data including encounter data and fee-for-service data. The Contractor will work with external research interests to assist with analyses of health status and health outcomes for CCFH populations.

The Contractor will develop analytical reports which compare Rhode Island's utilization experience with other similar populations.

The Contractor will provide the state with analysis of health plan encounter data, including monitoring accuracy and completeness as well as providing a description of the data set, and documentation of standard and routine analyses so that these could be independently replicated if necessary.

2-4. RItE Care Member Enrollment Support

Monitor activities and develop and produce reports related to eligibility and enrollment. Provide technical expertise to support Health Plan or other service delivery system enrollment functions. Participate in the development of procedures to assure prompt disenrollment of ineligible populations; as well as prompt enrollment of eligibles.

2-5. Center for Child and Family Health Member Services Supports

- Provide bilingual support for CCFH Call Center and designated field offices to assist non-English speaking beneficiaries to understand, enroll in, and access services in RItE Care.
- Develop and maintain written policies and procedures
- Assist in staff training and monitoring
- Produce monthly reports of call activity, including types of inquiries, complaints and call center efficiency

2-6 CCFH Administrative Support

The Contractor will provide an integrated support function which will provide office management, administrative and clerical support to CCFH staff and on-site contractor staff, including such activities as:

- Production of documents and reports

- Office reception
- Correspondence/notices/copying/mailings
- Organizing meetings
- Assisting contractor and state staff to maintain an official file of important documents such as CMS correspondence and reports, other correspondences, contracts, etc.
- Providing executive administrative support functions for CCFH and contractor executive staff.

TASK 3: HEALTH POLICY AND PLANNING

Task 3 is divided into the following activities:

- Activity 1: Health Planning
- Activity 2: Adult Health Policy and Planning Support
- Activity 3: Reports and Presentations
- Activity 4: Communication
- Activity 5: Center for Child and Family Health Community Advisory Activities

The Department of Human Services is responsible for the expenditure of \$1.4 billion as the Medicaid single State agency. DHS is the accountable agency responsible for the policy development and planning for the expenditure of the Medicaid funds granted to Rhode Island by the CMS under Title XIX and Title XXI. The Contractor will support the DHS as it plans and develops strategic options to improve access for all Medicaid populations to quality health care while containing costs through the design, development and implementation of accountable delivery systems through performance based contracts. The overall objective of this purchasing strategy is the improvement of access to a coordinated system of primary, preventive, urgent care, medical care management, and long term supports in community based settings and thus decrease reliance on and the need for institutional based services.

3-1 Health Planning

This activity will include facilitating and supporting strategic planning processes, conducting health policy and service analyses, reports and Issue Briefs. This activity will also include seeking and managing foundation and other grants and other resources to support health policy and program decisions as Rhode Island's Medicaid Program continue to move from a payor to an accountable purchaser.

This activity will also include assuring that research and evaluation are coordinated with health policy and planning activities and with program development and monitoring

The Contractor will ensure effective distribution of print, web-based and other materials describing CCFH programs and initiatives, targeting enrollees, Health Plans, providers, employers, national health policy and foundation audiences, and other stakeholders.

3-2 Adult Health Policy and Planning Support

The Contractor will support the Center for Adult Health in developing health care delivery system models that provide coordinated, integrated delivery systems and also will develop community based options as an alternative to institutional-based care for Medicaid eligibles. Under this Activity, the contractor will support the development of options for long term care, and options for coordinated care for adult populations with special needs and chronic health problems.

3-3 Reports and Presentations

This activity will include completion and dissemination of public reports on CCFH program and policy, including CMS Program and waiver reports, legislative reports, program reports, presentations, site visits, planning grant reports, and other CCFH, Medicaid and SCHIP reports.

This will include the coordination and response to internal and external requests such as review of legislation, health program and policy surveys, program briefings, etc.

The Contractor will maintain an organized, up to date file of all CCFH official correspondence, including waiver submissions and related correspondence, reports submitted to CMS and State legislative groups, and other public reports and presentations as described above.

3-4 Communication

This activity will include coordination of all public communication activities for CCFH.

The contractor will assist the state in developing and maintaining an up to date overall communication plan and strategy for CCFH. Activities include:

- Develop, implement, evaluate, and maintain CCFH communication plan
- Assist CCFH to respond to media inquiries and other requests for program information
- Develop and maintain consumer education promotional materials about CCFH programs and services
- Develop and maintain RIte Share education/promotional materials targeted to employers
- Assist in production and dissemination of program materials, such as Issue Briefs, reports and program information. Maintain an organized file and supply of program promotional materials.

3-5 Center for Child and Family Health Community Input and Advisory Activities

CCFH serves as the change agent for the design and implementation of health service delivery systems to serve low-income families and special needs populations. To assure that its effort to improve programs reflects the interests of its target populations, CCFH interacts regularly with multiple community-based organizations including: RIte Care Consumer Advisory Community, Leadership Roundtable, and various stakeholder and interests groups. The Contractor will support CCFH in the preparation of materials and reports for such meetings and groups, analysis of stakeholder suggestions, convening workgroups and preparing meeting notes.

TASK 4: SUPPORT THE OFFICE OF CHILD CARE

Provide monitoring and technical assistance functions to assist the Department in its oversight of state funded comprehensive child care providers.

TASK 5: OVERSIGHT AND MANGAMENT OF MEDICAID SPECIAL EDUCATION PROGRAM

- Maintain Rhode Island Guidebooks for claiming special education cost under Medicaid including an Administrative Claiming Guide and Direct Service Claiming Guide. These guidebooks must be current in relation to CMS rules, guidance and federal/state audit findings.
- Provide annual training and update training on both guides for school districts.
- Ensure that LEA/State agreements reflect all program requirements and are updated as required.
- Calculate administrative rate for each LEA based on the percent of Medicaid eligible children in each school district. The rate calculation will be updated annually and as needed and distributed to LEAs.
- Provide oversight and monitoring of LEAs to ensure Medicaid claiming and back-up documentation is in compliance with CMS/State guidelines.
- Assist DHS financial units to process claims by reviewing LEA bills for accuracy
- Provide routine reports to state staff of LEA Medicaid expenditures by district and type of service claim (administrative and service claims)
- Develop and maintain an organized file and reporting system on all LEA Medicaid documents, including federal and state guides, audit findings and responses, correspondence with LEAs and CMS, LEA agreements, expenditure and utilization reports, etc.

TASK 6: SPECIAL PROJECTS / ENHANCEMENT ACTIVITIES

This task will be bid and paid on a time and materials basis

In addition to the activities described under Tasks 1-5, DHS seeks to keep its Medicaid Program current with state of the art program policy, procedures and operations. There is often a need to develop and implement new programs, initiatives, business methods, and analyses in response to changes in federal law and regulation, state legislation, and best practice advances in health policy and health care delivery systems.

The Contractor must demonstrate the capacity, capability, flexibility and responsiveness to bring on additional contract staff or consultants in response to the state's need for additional capacity to perform additional activities which require similar expertise and work functions as those in Tasks 1 through 5. The state has specified a contractual allowance that will be included in the contract for this purpose.

It is the state's intent to utilize these enhanced program improvement resources as needed in response to the state's changing needs and requirements and as funding allows, including the use of temporary project funding through federal or foundation grants or other sources.

The bidder will provide a list of positions, fully loaded hourly rates and staff qualifications for staff/consultants who could be brought on for enhanced program improvement activities.

The decision to utilize contract services under Task 6 will be at the state's request for specified enhancement activities, not already included under Tasks through 5, to be defined and agreed to in writing before the enhancement work begins. There is no commitment on the part of Rhode Island Department of Human Services to specifically utilize any or all of the enhanced/special project services.

SECTION IV. MINIMUM CONTRACTOR REQUIREMENTS

Contractor Requirements

The Contractor must have at least 5 years of experience in design, implementation and management of integrated health service delivery systems for Medicaid populations and populations with special needs.

The Contractor selected as a result of this RFP will be required to provide a sufficient number of dedicated on-site and consulting project staff with appropriate expertise and credentials to carry out all tasks listed in the Task 1 – 5. The Contractor will also be required to propose staff or consultant positions that could be filled as needed to conduct special project tasks to be paid on a time and materials basis under Task 6.

Appendix I illustrates the current contractor level of effort for the current scope of work. It is not meant to define the staffing necessary for the tasks and activities contained in this RFP.

The selected Contractor will have sufficient corporate experience and corporate resources necessary to successfully complete all tasks.

Contractor Responsibilities

1. The state shall supply Contractor with an initial supply of computers, printers and software for its staff. Contractor will be responsible for any upgrades, new software or replacement of computers and printers for use by contractor staff.

Data, information, and reports collected or prepared by the contractor or equipment, such as computers, purchased by the contractor in the course of performing its duties and obligations under this contract shall be deemed to be owned by the state of Rhode Island. This provision is made in consideration of the contractor's use of public funds in collecting and preparing such data, information, and reports, and in purchasing equipment.

2. The State shall supply contractor with office space and equipment such as desks, file cabinets and phones. Contractor will be responsible for any new or upgraded office equipment needed by contractor staff.
3. Contractor will supply office support sufficient to carry out the tasks within the contract.
4. All travel costs for contractor staff, including in-state and out of state travel necessary to carry out the tasks within the contract, will be the responsibility of the Contractor.

Contract Term

Services under the contract are subject to approval of CMS, the State's Chief Purchasing Officer and the signature of the Director of the Department of Human Services or her designee shall commence on July 1, 2004, and will run through June 30, 2007. The contract shall include three one-year extensions, to be exercised at the option of the state, with CMS approval.

In the contract, the state intends to reserve the right, if it so chooses, to decrease staffing levels and forego the work associated with that staff. Should the State elect this option, payment will be adjusted by subtracting the fully loaded cost for that position. The state will provide adequate notice to the contractor should the state decide to exercise this option.

SECTION V. PROPOSAL SUBMISSION

This Request for Proposals is being issued by the Rhode Island Department of Administration (DOA) on behalf of the Department of Human Services. **The Office of Purchases within the Department of Administration shall be the primary point of contract for all bidders from the date of release of the RFP until the primary point of contact for all bidders from the date of release of the RFP until the contract is fully executed and signed.** Any attempt by a bidder to contact any State employees regarding this procurement, other than those named above, may cause rejection of a bid submitted by that party.

Questions concerning this solicitation may be emailed to the Division of Purchases at questions@purchasing.state.ri.us no later than the date and time listed on the cover page of this solicitation. Questions should be submitted in a *Microsoft Word attachment*. Please reference the RFP / LOI number of all correspondence. Questions received, if any, will be posted on the Internet as an addendum to this solicitation. It is the responsibility of all interested parties to download this information. For computer technical assistance, call the Help Desk at (401) 222-2142, ext. 134.

Bidders should recognize that the only official answers to any questions will be those made in writing and issued by the Office of Purchases to prospective bidders.

Procurement Library

A procurement library shall be made available to prospective bidders, by appointment, at:

Center for Child & Family Health
Division of Health Care Quality, Finance & Purchasing
Department of Human Services
600 New London Avenue
Cranston, RI 02920
(401) 462-6356 or (401) 462-0140

Interested offerors may submit proposals to provide the services covered by this Request on or before The date and time listed on page one of this solicitation. Proposals received after this time and date will not be considered.

Responses (**an original plus 3 copies**) should be mailed or hand-delivered in a sealed envelope marked **“RFP #B03703: Health Care Technical Services”** to:

By Courier:	By Mail:
RI Dept. of Administration Division of Purchases, 2 nd Floor One Capitol Hill Providence, RI 02908-5855	RI Dept. Of Administration Division of Purchases P.O. Box 6528 Providence, RI 02940-6528

NOTE: Proposals received after the above-referenced due date and time will not be considered. Proposals misdirected to other State locations or which are otherwise not presented in the Division of Purchases by the scheduled due date and time will be determined to be late and will not be considered. Proposals faxed, or emailed, to the Division of Purchases will not be considered. The official time clock is located in the reception area of the Division of Purchases.

Proposals should include the following:

1. A completed and signed three-page RIVIP Bidder Certification Form, which can be downloaded from the website at www.purchasing.ri.gov. Offerors are requested to have a copy of this form in all proposals/copies of proposals submitted in accordance with this solicitation. For computer technical assistance, call the Helpline at (401) 222-2142, ext. 134.
2. A Technical Proposal describing the background, qualifications, and experience with similar programs, as well as the Workplan or approach proposed contract, including completion of Attachments A and B enclosed. The technical proposal shall be limited to 50 double spaced pages using a font not smaller than 12 point **not** including attachments.
3. A separate Cost Proposal reflecting the hourly rates and other fee structures proposed for this scope of services, including completion of Attachments C and D enclosed. The cost proposal shall be limited to 10 double spaced pages using a font not smaller than 12 point **not** including attachments.

The Technical Proposal and Cost Proposal shall be separately sealed and clearly marked. There shall be no reference to price(s) in the Technical Proposal.

THE TECHNICAL PROPOSAL MUST CONTAIN THE FOLLOWING SECTIONS:

Executive Summary

The Executive Summary is intended to highlight the contents of the Technical Proposal and to provide the State evaluators with a broad understanding of the offeror's technical approach and ability.

Corporate Experience and Background

This section shall include the following information:

- A listing of similar projects undertaken and/or similar clients served, including a brief description of the projects, with identification of tasks where contractor has been used for work similar to those in this RFP. This list should identify the person or persons who supervised the work of the contractor and contact information (for the purpose of reference checks).
- A description of the business background of the offeror (and all subcontractors proposed), including a brief description of offerer's financial position, and also including contractor's experience in design implementation and management of integrated health service delivery systems for Medicaid or other low-income populations, and for populations with special health care needs.
- Corporate Resources which will be available to support this project including corporate support of contract management functions as well as the types and availability of corporate resources available to support the state's needs for timely response to requests to perform special projects/enhancement activities under Task 6. (The specific qualifications of corporate resources will be further described the next section.)
- The offeror's status as a Minority Business Enterprise (MBE), certified by the Rhode Island Department of Economic Development, and or a subcontracting plan which addresses the State's goal of ten percent participation by MBE's in all State procurements. Further questions may be directed to the State's MBE officer at (401) 222-6253.

Workplan/Approach Proposed

This section shall address Tasks 1-5

- This section shall describe the offeror's understanding of the State's requirements, including the result(s) intended and desired, the approach and/or methodology to be employed, and a Workplan for accomplishing the Tasks and the results proposed. The Workplan description shall include a list of tasks, activities, and/or milestones that will be employed to successfully administer the project.

Staffing Plans

This section shall address Tasks 1-6 and should include:

- Qualifications

This section shall include a description of all positions to be used for Tasks 1-6. This section should include a description of each position, including minimum experience and qualifications, and should include, in an attachment to the technical proposal, qualifications of key staff and/or positions proposed for all Tasks under this contract

- Level of Effort

This section will indicate the number and types of all positions and list any Subcontractors being offered to perform the Tasks (1-5), indicating level of effort as well as duties and responsibilities in relation to the scope of work. Attachments A and B should be completed in support of this section.

- Organization

This section should include a description of how the contractor staff will be organized and supervised, as well as the role, responsibilities and authority of a full-time on-site contract manager to be flexible and responsive to the State's needs, as described in this RFP.

THE COST PROPOSAL MUST CONTAIN THE FOLLOWING

The scope of work for Tasks 1-3 shall be bid on one fixed price basis. Within this fixed price, fully loaded costs of staff and ODC (other direct costs) will be paid on a monthly basis to be billed and paid in accordance with actual positions filled, subcontractors utilized, and ODCs incurred, not to exceed the annual fixed price for Tasks 1-3.

The scope of work for Task 4 will be bid on one fixed price basis. Within this fixed price, fully loaded costs of staff and ODC (other direct costs) will be paid on a monthly fixed price basis to be billed and paid in accordance with actual positions filled, subcontractors utilized, and ODCs incurred, not to exceed the annual fixed price for Task 4

The scope of work for Task 5 will be bid on one fixed price basis. Within this fixed price, fully loaded costs of staff and ODC (other direct costs) will be paid on a monthly fixed price basis to be billed and paid in accordance with actual positions filled, subcontractors utilized, and ODCs incurred, not to exceed the annual fixed price for Task 5

The Contractor will bid Task 6 at the state suggested maximum allowance of \$750,000 per year. When the State elects to commission special projects, the Contractor will be paid on a time and materials basis in accordance with the labor costs in Attachment C.

The cost proposal will include completion of the set up of Attachments C which, should include all positions and subcontractors for Tasks 1-6, as indicated. Please complete these pages for each of the contract years.

The cost proposal shall also detail the percent of staff salaries that will be devoted to benefits, overhead, and profit. Please indicate a separate percent of salary to be charged within the fully loaded rate for each of these categories:

- Benefits, include insurances (health, disability, life), pension, and payroll taxes. Please describe level and type of employee benefits, as well as level of employee contribution required.
- Overhead, including office expenses/other
- Profit
- Other

The cost proposal shall also provide percent overhead and percent profit to be charged, as well as any other costs composing the fully loaded rate, as a percentage of direct subcontractor costs.

The proposal cost of ODCs (e.g. travel, allowances, etc.) shall be indicated separately on Attachment D. The cost proposal shall detail what is covered under ODCs.

The cost proposal will include the completion of Attachment D-1 for Tasks 1-3, D-2 for Task 4, and D-3 for Task 5 and D-4 Task 5, and D-5 for all Tasks.

SECTION VI. EVALUATION AND AWARD

The State will commission a Technical Review Subcommittee, which will evaluate and score all proposals that are complete and minimally responsive, using the criteria described below. The evaluation of any item may incorporate input from sources other than the bidder's response and supplementary materials submitted by the bidder. Those other sources could include assessments made by evaluators based on findings recorded from reference checks (including but not limited to those supplied by the Contractor), prior experience with or knowledge of contractor's work and comments made by the bidder staff during any formal interviews, presentations, and question/answer sessions. The State may elect to use any or all of these evaluation tools to clarify the proposal materials. Bidders will receive prior written notice of the State's intent to schedule an interview, or question answer session; and proposed staff who are requested to attend.

EVALUATION CRITERIA

1. Corporate Experience and Corporate Resources available to support this project 30 Points

The Contractor must have at least 5 years of experience in design, implementation and management of integrated health service delivery systems for Medicaid populations and populations with special needs. Evaluators will consider prior experience and expertise in the tasks described.

Evaluators will strongly consider recommendations from other clients utilizing contractor for similar work to be performed under the contract. Negative feedback from other clients will be cause for significant point deductions.

Evaluators will score highly bidders who demonstrate adequate Corporate Resources and flexibility to bring project staff on quickly in particular in response to the State's need for special project staff/subcontractors for short-term special projects under Task 6. Resumes of suggested corporate staff/consultants available to work on special projects will be reviewed for qualifications and experience, and strongly considered.

Corporate level support for the contract management functions of the contract will be considered in the score.

Contractor or subcontractor status as an MBE will also be considered.

2. Staffing Plan and Qualifications 20 Points

Evaluators will score highly bidders who present a staffing plan for Tasks 1-5, which in the evaluators' best judgment, will accomplish each task effectively and efficiently with an excellent product as a result. Level of expertise, experience and qualifications of proposed positions,

proposed key staff, and proposed subcontractors will be considered significantly. Proposed staff organization and supervision will also be considered.

Over-reliance on project staff to perform “contract management” tasks will result in deducted points.

3. Technical Approach and Understanding of Work 25 Points

The Contractor’s written proposal describing how the contractor intends to fulfill the tasks will be scored. Evaluators will score bidders highly who demonstrate a clear, complete understanding of the tasks and who present an effective organization and work plan for accomplishing them. Points will be deducted for bidders who do not demonstrate a clear and adequate understanding of the tasks.

4. Value 25 Points

Considering that the primary work of the contract is to provide an adequate level of qualified staff to perform the tasks in the scope of work at the best price to the state, cost proposals will be evaluated for each bidder, fully considering the following elements:

- Value of proposed staff for the fully loaded cost proposed will be scored by comparing fully loaded rates for each position/subcontract to the qualifications and experience of staff/positions/subcontractors proposed. The value the state will receive in qualified experienced staff for the labor rates indicated will be considered and scored.
- Level of effort proposed for Tasks 1-5, including number and qualification level of positions, key staff and subcontractors to be devoted to the contract considered against total price proposed.
- The evaluators will also consider components of the contractor’s fixed price bids, as well as the time and materials, staffing bid, other than labor rates and subcontract rates, including evaluating the value of what is provided under contract overhead, ODCs proposed, and employee benefits.
- Total fixed price cost proposed.

Award

The Technical Review Subcommittee will present written findings, including the results of all evaluations, to the state’s Architect/Engineer and Consultant Services Selection Committee which, will make a recommendation of award to the Director of the Department of Administration, who will make the final selection for this RFP.

Notwithstanding the foregoing, the State reserves the right to award on the basis of cost or savings potential alone, and to disqualify or not consider any strategy proposal that is determined not to achieve State's fiscal or programmatic goals.

The State also reserves the right to award on the basis of cost alone, to accept or reject any, or all, options, bids, proposals, and to act in its best interest.

Proposals found to be technically and substantively non-responsive at any point in the evaluation process will be rejected and not considered further.

The State may elect to require presentations by Offerors clearly in consideration for award.

Proposals found to be technically or substantially non-responsive at any point in the evaluation process will be rejected and not considered further.

The Technical Review Sub-Committee will present written findings, including the results of all evaluations, to the State's Architect/Engineer and Consultant Services Selection Committee, which will make a recommendation of award to the Director of the Department of Administration, who will make the final selection for this requirement.

Federal and State Approvals

Final contract approval is contingent upon Federal and State approvals. Every effort will be made by the State to facilitate rapid approval upon award.

SECTION VII. GOVERNING TERMS AND CONDITIONS

All State Purchase Orders, Contracts, Solicitations, Delivery Orders and Service- Requests shall incorporate and be subject to the provisions of Title 37 Chapter 2 of the General Laws of the State of Rhode Island, the Regulations adopted pursuant, thereto, all other applicable provisions of the Rhode Island General Laws, specific requirements described in the Request or Contract, and the General Conditions of Purchase. This information is available on the Rhode Island Division of Purchases web site www.purchasing.ri.gov:

VIII. GLOSSARY

ASSC	Adolescent Self Sufficiency Collaborative
CAC	Consumer Advisory Committee
CAH	Center for Adult Health
CCFH	Center for Child and Family Health
CEDARR	Comprehensive Evaluation Diagnosis Assessment Referral Re-Evaluation
CFA	Center for Finance and Administration
CMS	Center for Medicare and Medicaid Services
CHC	Community Health Center
CSHCN	Children with Special Health Care Needs
DHS	Department of Human Services
DIFS	Division of Individual and Family Support
ECU	Employer Contact Unit
EQRO	External Quality Review Organization
FFS	Fee-for-Service
FIP	Family Independence Program
FPL	Federal Poverty Level
FQHC	Federally Qualified Health Center
FRC	Family Resource Counselors
HBTS	Home Based Therapy Services
HCBS	Home and Community Based Services
HCQFP	Health Care Quality, Financing and Purchasing
HMO	Health Maintenance Organization
LEA	Local Education Authority
MBE	Minority Business Enterprise
MMIS	Medicaid Management Information System
NAIC	National Association of Insurance Commissioners
NCQA	National Committee for Quality Assurance
NICU	Neonatal Intensive Care Unit
ODCs	Other Direct Costs

PPS	Prospective Payment System
QIP	Quality Improvement Plan
R and E	Research and Evaluation
RFP	Request for Proposal
RICHCA	Rhode Island Community Health Center Association
RIPTA	Rhode Island Public Transit Authority
SPMI	Seriously and Persistently Mentally Ill
SSI	Supplemental Security Income
TANF	Temporary Assistance to Needy Families
Title XIX	Medicaid (Federal Program)/Medical Assistance (RI's Program)
Title XXI - SCHIP	State Children's Health Insurance Program
TPL	Third Party Liability
UR	Utilization Review

Appendix 1

Level of Effort

The following list of positions and vendors is for illustrative purposes only. It is meant to provide a framework for sizing the level of effort in the Health Care Consulting and Management contract currently in place with DHS.

Positions:

- Project Manager
- Deputy Project Manager
- Medical Director
- Finance Director
- MIS Consultants
- Research and Evaluation Coordinator
- Health Policy Specialist
- Health Plan Contract Consultant
- RIte Share Project Coordinator
- Quality Assurance Nurse
- Program Analysts (2)
- Publicity Coordinator
- Clinical Care Coordinator (2)
- Senior Executive Assistant
- Executive Assistant
- Production Manager
- Client Service Specialists (2)
- Employer Service Specialist
- Administrative Assistants (2)
- Bilingual Customer Service (6)
- Program Support /Parent Advocate

Vendors:

- Information System Organizations
- Graphic Design
- Health Care Statistical Analysis
- Actuary Organizations
- Research and Analysis
- Family Advocacy Organizations
- Training Institutes
- Clinical Specialists
- Program Development Specialists